DE _ARATION AND POWER OF ATT FOR PATENT APPLICATION

RNEY

Docket Number 13DV13944

As a below named invento	or, I hereby declare that:				<u> </u>		
My residence, post office a	address, and citizenship ar	e as stated below ne	ext to my name.				
I believe I am the original, f names are listed below) of	first and sole inventor (if or the subject matter which is	nly one name is lister s claimed and for wh	d below) or an original, fir ich a patent is sought on	rst and joint inve	ntor (if	plura	al
	APPARATUS FOR OPER				ililieu.		
			· · · · · · · · · · · · · · · · · · ·				
the specification of which							
is attached hereto OR							
was filed on	as United States	Application Number	or PCT International App	dication Number			
and was amended on	' (if applica	able)					 -
I hereby state that I have revany amendment specifically I acknowledge the duty to dis I h reby claim foreign priority or inventor's certificate, or §3 States of America, listed belo	sclose information which is benefits under Title 35, U	material to patentab	oility as defined in Title 37	7 Code of Federa	al Regu	ılatio	ons, §1.56.
international application having	ng a filing date before that				trian u ate, or o	of an	nited ly PCT
PRIOR FOREIGN APPLICAT	「ION(s)		· •		Priorit	y CI	aimed
(Number)	(Count	ry) .	(Day/Month/Year Filed)		Yes		No
(Number)	(Count		(Day/Month/Year Filed)		Yes		No
Additional foreign application	n numbers are listed on a sup		sheet attached hereto				•
I hereby claim the benefit unde		Code §119 (e) of any (Filing Date)	United States provisiona	Additional prinumbers are	ovision listed o	al app	plication
·	·			supplemental priority data sheet			a sheet
I hereby claim the benefit und international application design this application is not disclosed of Title 35, United States Code 37, Code of Federal Regulation international filing date of this a	d in the prior United States e §1.12, I acknowledge the ns §1.56 which became a application.	s or PCT Internationals duty to disclose info	ow and, insofar as the sub all application in the mann ormation which is materia filing date of the prior ap	bject matter of ea ner provided by to all to patentability oplication and the	ach of the first as defeated	the c para ined nal or	agraph in Title r PCT
(Application Numb	ver)	(Filing Date)	(Status -	- patented, pend	ing, ab	ando	oned)
(Application Number	er)	(Filing Date)	(Status -	- patented, pend	ing, ab	ando	ned)
I hereby appoint the register transact all business in the P	ed practitioners associa Patent and Trademark O	ted with Customer	Number 29399 to propresent.	osecute this ap	plicati	on a	ind to
Address all telephone calls to:	ROBERT S. REE	SER at tel	ephone number (3	14) 552-6646			
Address all correspondence to:	ARMSTRONG LAW OF ATTN: JOHN S. I ONE METROPOLITAN ST. LOUIS, MO	FFICES BEULICK N SQUARE	P	14) 332-0040			
GEAE (9/97)	CUSTOMER NUMBER	₹: 29399	PATENT & TRADEMARK	OFFICE	Pa	ge l	of

Docket Number 13DV13944

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR F	FIRST INVENTOR:			
Full name:	IVAN ELMER WOLTMANN	N		
	First Name	Middle Name	Last Name	
Signature:	Mum Elmer	? Hallmann		hi
			Date	<u>C7</u>
Residence:	-,		Citizenship: US	
	City and State			
Post Office A	Address: 8367 MARY LEF	E LANE, WEST CHESTI	ED OU 12060	
		· Dilitas	EK, UR 43007	
OFFICIAL IC	***			
	OINT INVENTOR:			
Full name:	First Name	2010 11 11		
		Middle Name	Last Name	
Signature:			Date	
5 H-200				
Residence:	City and State		Citizenship:	
- · ^@-> /				
Post Office A	Address:			
		-		
THIRD JOINT	T INN/ENTOD.			
Full name:	INVENTOR.			
rui namo	First Name	Middle Name	I and Alama	
	•		Last Name	
Signature: _			Date	
Residence:				
Residence.	City and State		Citizenship:	
Post Office Ad	· d			
MOST OTHER ME	Idress:			
·				
OURTH JOIN	NT INVENTOR:			
Full name:				
	First Name	Middle Name	Last Name	
'ianatura'				
lgnature			Date	
Residence:				
_	City and State		Citizenship:	
Post Office Add				
OSI OINCE AUC	Jress:			
EAE (9/97)				Page 2 of 2